

djcunningham@nc.rr.com

Franklin County Health Department
Division of Environmental Health
107 Industrial Drive-Suite C
Louisburg, North Carolina 27549

PAGE 1 OF 2

Phone: 919-496-8100

SEPTIC PERMIT

Fax: 919-496-8136

Permit Number: 8907 Type: I PIN: 2801-02-3029 Date: 8/22/2016

Applicant: BRANDYWINE HOMES Owner:

PO BOX 910

WAKE FOREST, NC 27588

Telephone: (919) 427-8982

Telephone:

Subdivision: BISHOPS RIDGE

Lot Number: 30

Size: 0.470

Physical Address/ Location /Directions 100 CHURCHILL RD

Description: LifeTime 5 Year X

TYPE FACIL SFD # EMPLOY 1 # BEDRMS 3 GPD 360 LTAR .35
TYPE WAT RAW TYPE SYS P/A TYPE REP P/A BSMT N BST FX N/A
SIZE TANK 900 SIZE CHB 1000 SIZE NTR 3x310 MTD 20"

COMMENTS:

See layout / tap chart by CLSC

Septic Contractors are responsible for notifying the health department for final inspections, between 8:00-9:00 AM on the day of completion, Monday - Friday. Any request for final inspections received afterwards will be scheduled the same day, if possible, or the next workday. Have permit number and owner/applicant's name ready when making the call.

Actions of representatives of state or local agencies engaged in the evaluation and determination of measures required to effect the compliance with the provisions of this permit shall in no way be taken as a guarantee that wastewater disposal systems permitted and approved will function in a satisfactory manner for any given period of time, or that such employees assume any liability for damages, consequential or direct which are caused, or may be caused, by a malfunction of this wastewater treatment and disposal system.

Proper precautions must be taken to assure the proper functioning of the system after it has been covered. Do not run any heavy equipment over the system, as soft earth will allow damage to the tank and lines. Pipe all roof drains away from the septic system site to prevent flooding of the lines from surface water. Terrace the ground to prevent excessive drainage from higher areas adjacent to the system. Do not construct driveways over any part of the septic system unless proper provisions were made when the septic system was constructed. Only grass, not trees or shrubbery, should be cultivated over the lines. All plumbing fixtures should be carefully inspected periodically and any problems repaired immediately. All septic tanks should be pumped off by a permitted pump operator on a regular schedule, not to exceed every five years.

The improvement permit and construction authorization is a site approval, for the future installation of a wastewater treatment and disposal system. Changes in ownership of the site do not affect the validity of this permit. However, any alteration of the site or soil conditions, changes in the location of the proposed facility, changes to the wastewater flow and/or characteristics, or submittal of false information with the application or misrepresentation of the property lines may subject this permit to suspension or revocation.

FOR THIS TO BE A VALID CONSTRUCTION AUTHORIZATION, A LAYOUT SHEET MUST BE ATTACHED

IMPROVEMENT PERMIT DATE 9/9/16 EHS [Signature]

CONSTRUCTION AUTHORIZATION DATE 9/9/16 EHS [Signature]

Visit www.franklincountyenvironmentalhealth.com for permit information and tracking.



Health Department
107 Industrial Drive, Suite C
Louisburg, NC 27549
Phone: 919-496-2533
Fax: 919-496-8127
www.franklincountync.us

FRANKLIN COUNTY ENVIRONMENTAL HEALTH

SEPTIC SYSTEM PUMP REQUIREMENTS

PUMP SYSTEM FEE

An additional fee of fifty dollars (\$50.00) is assessed when a pump and related components are required for a new septic system. This fee must be paid prior to the Operations Permit being issued. Franklin County Environmental Health request the fee is paid before beginning the ~~septic installation to make the final inspection go smoothly. The septic permit will not be signed off and a CO cannot be obtained until this fee is paid.~~ This fee may be paid in person or by mail at:

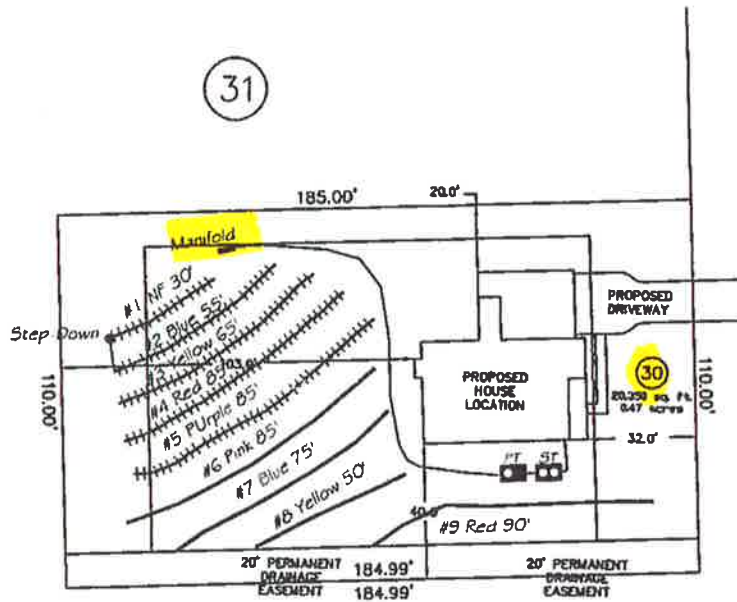
Franklin County Health Department
Environmental Health Section
107 Industrial Dr, Suite C
Louisburg NC 27549

When making payment, please provide the permit number and the applicant name to ensure the payment is applied to the correct permit.

PUMP TO GRAVITY DISTRIBUTION

Unless otherwise noted on your septic permit or related attachments, the minimum type distribution method for your septic system is by means of a distribution box (D-box). This is achieved by pumping the wastewater to a D-box and allowing gravity to naturally disperse the wastewater equally to each drain line. This type distribution may be used for up to four (4) drain line laterals. The D-box should be watertight. The supply line is to be terminated in the D-box with a 90 degree elbow directed downwards to prevent a "swirling" action of the wastewater. The D-box location should be marked on-site to make it easily identifiable and prevent damage.

Bishops Ridge Lot 30
3-Bedroom Septic System Layout
August 2016



- *Keep Tanks and Drain lines 10' from property lines.
- *Not a Survey
- *Not a guarantee of a septic permit.
- *Keep supply lines >5' from property lines.
- *Some lines are flagged longer in the field than lengths indicated above.

System: ++++++
Repair: ————

Approved 9/2/16
JRW

System: Pressure Manifold
Lines: 1-5, (310')
0.3 Soil LTAR
20' Trench Bottom
Accepted Status

System: Pressure Manifold
Lines: 6-9, (300')
0.3 Soil LTAR
20' Trench Bottom
Accepted Status

GRAPHIC SCALE
1" = 50'



Central Carolina
Soil Consulting
919-569-6704
Project # 1989

Sheet1

Bishops Ridge lot 30

TAP CHART

Bench Mark		is = 100.00	Location of BM:			Elevation Head		11.30	
Pump tank el	0	5.9	94.10	Pump elev.	89.10	Manifold elev.		100.40	
line	color	rod read	Elevation	length	hole size	flow/tap	gal/day	trench area	LINE LTAR
1 & 2	NF/Blue	0.60	99.40	85	1/2in SCH 40	7.11	95.47	255	0.3744
3	Yellow	2.40	97.60	65	1/2in SCH 80	5.48	73.58	195	0.3774
4	Red	3.10	96.90	80	1/2in SCH 40	7.11	95.47	240	0.3978
5	Purple	3.80	96.20	80	1/2in SCH 40	7.11	95.47	240	0.3978

	total	feet =	310	gal/min =	26.81	<u>LTAR =</u>	0.3000
						<u>LTAR + %6</u>	0.3160
% of Dose Vol.	75		<u>Des. Flow</u>	360		(ltar W/ INOV)	0.4000
Dose Volume	151.13		Pump Run=	13.43		(ltar W/ INOV + 6%)	0.4200
Dose Pump Time	5.64		Tank Gal/IN	21			
Drawdown in Inches	7.20						

Bishops Ridge Lot 30

Repair TAP CHART

Bench Mark:		is = 100.00	Location of BM:			Elevation Head		7.40	
Pump tank elev.	5.9	94.10	Pump elev.	89.10	Manifold elev.		96.50		
line	color	rod read	Elevation	length	hole size	flow/tap	gal/day	trench area	LINE LTAR
6	Pink	4.50	95.50	85	1/2in SCH 40	7.11	95.79	255	0.3757
7	Blue	5.10	94.90	75	1/2in SCH 40	7.11	95.79	225	0.4257
8	Yellow	5.50	94.50	140	3/4in SCH 40	12.5	168.41	420	0.4010

	total	feet =	300	gal/min =	26.72	<u>LTAR =</u>	0.3000
						<u>LTAR + %6</u>	0.3160
% of Dose Vol.	75		<u>Des. Flow</u>	360		(ltar W/ INOV)	0.4000
Dose Volume	146.25		Pump Run=	13.47		(ltar W/ INOV + 6%)	0.4200
Dose Pump Time	5.47		Tank Gal/IN	21			
Drawdown in Inches	6.96						

Franklin County Health Department

Name: BRANDYWINE HOM

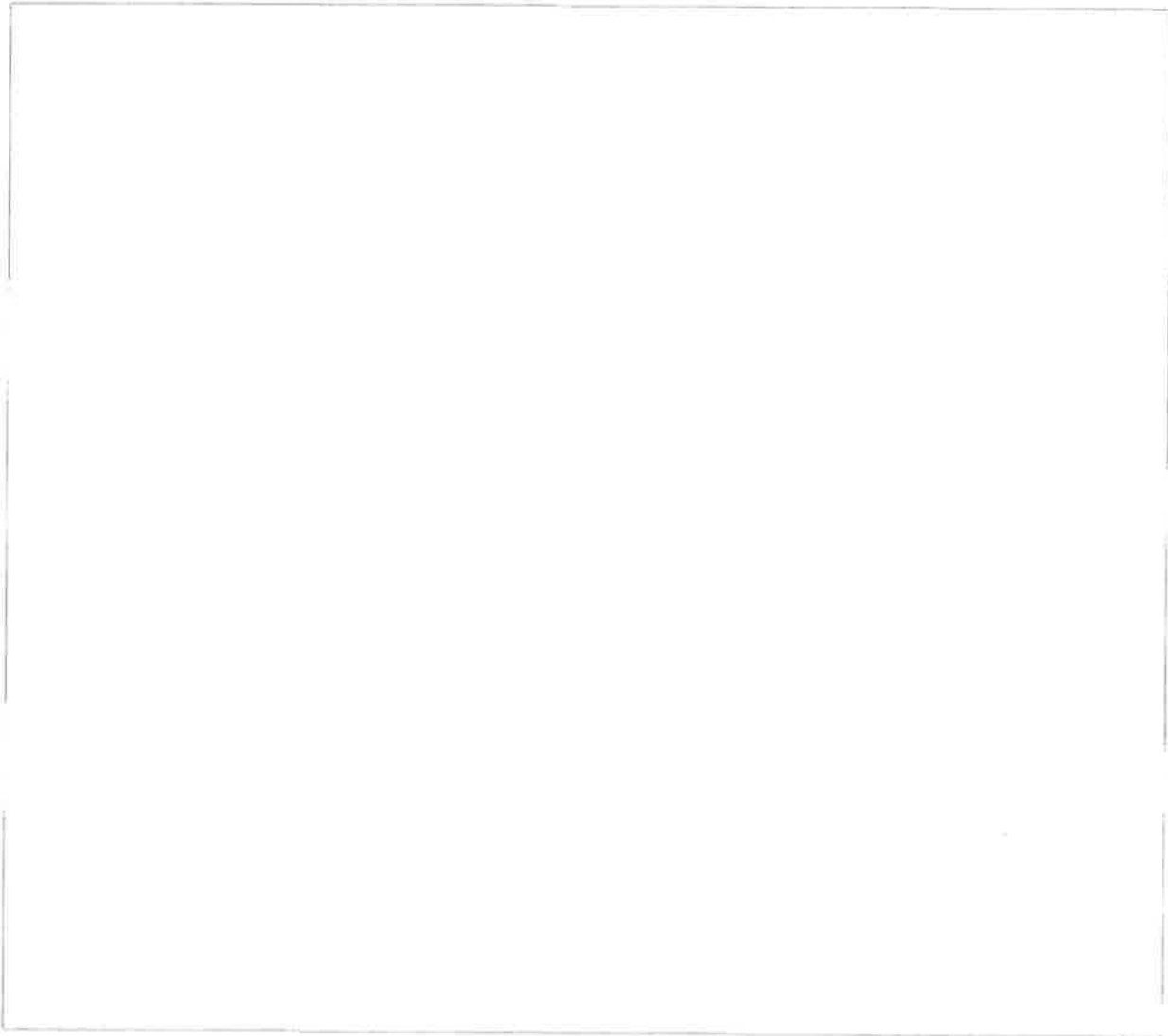
Permit Number

8907

CONTRACTOR _____ TANK MANU _____ MANU DATE _____

WELL INSTALLED YES _____ NO _____ SYSTEM CODE _____

SEPTIC SYSTEM LAYOUT (SKETCH SYSTEM LAYOUT HERE)



SEPTIC SYSTEM AS-BUILT
(IF DIFFERENT FROM INITIAL LAYOUT)
ON REVERSE

pump fee _____

OPERATIONS PERMIT

DATE _____ EHS _____